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| Fill in this information to identify your case: | | |
|---|---|-------------------------------------|
| United States Bankruptcy Court for the: Northern District of: Illinois (State) | <u></u> | |
| Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | heck if this is an mended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | Jasmine | |
| | First name | First name |
| Write the name that is on your government-issued | S | |
| picture identification (for | Middle name | Middle name |
| example, your driver's license or passport | Utley | |
| licerise or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last | First name | First name |
| 8 years | | |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | Lastrianie | Last Harrie |
| | First name | First name |
| | | |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX- 2902 | |
| Security number or federal Individual | OR | OR |
| Taxpayer Identification number | 9 xx - xx- | 9 xx - xx- |
| (ITIN) | | |

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| Deb | tor 1 Jasmine First Name | S Utley Middle Name Last Name | Case number (if known) |
|-------------|---|---|--|
| | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| a | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| 1 | dentification Numbers (EIN) you nave used in the last | Business name | Business name |
| | 3 years | Business name | Business name |
| | nclude trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. V | Where you live | | If Debtor 2 lives at a different address: |
| | | 3215 187th St Apt 205 Number Street | Number Street |
| | | Lansing Illinois 60438 | |
| | | City State Zip Code | City State Zip Code |
| | | Cook County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | | |
| | | City State Zip Code | City State Zip Code |
| c | Why you are choosing this district | Check one: | Check one: |
| t | o file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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| De | ebtor 1 Jasmine | S | Utley | _ Case number (if kno | own) |
|-----|---|--|---|--|--|
| | First Name | Middle Name | Last Name | | |
| Pa | rt 2: Tell the Court Abo | ut Your Bankruptcy Ca | ase | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | description of each, see <i>Notice Re</i> | | C. § 342(b) for Individuals Filing for opriate box. |
| 8. | How you will pay the fee | more details about cashier's check, or may pay with a cred I need to pay the feal Individuals to Pay 1 I request that my feal in the official poverty you choose this options. | how you may pay. Typically, if money order. If your attorney is dit card or check with a pre-prinee in installments. If you choo your Filing Fee in Installments fee be waived (You may reque to trequired to, waive your fee, a line that applies to your family | you are paying the submitting your ated address. se this option, signofficial Form 103 at this option only and may do so on size and you are to submit the | the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney on and attach the <i>Application for</i> BA). If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. | Have you filed for bankruptcy within the last 8 years? | ✓ No. Yes. District District District | Whe | MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No. Yes. Debtor District Debtor District | Whe Whe | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. | Do you rent your residence? | ✓ No. Go to | ord obtained an eviction judgment line 12. t <i>Initial Statement About an Evicti</i> o ankruptcy petition. | | st You (Form 101A) and file it with |

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Utley Debtor 1 Jasmine Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have Ⅵ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Jasmine S Utley Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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| Debtor 1 Jasmine | Middle Name | Utley | Case number (if known |) |
|---|---|--|---|--|
| Part 6: First Name Answer These Que | estions for Reporting Pur | Last Name | | |
| 16. What kind of debts do you have? | 16a. Are your debts pring "incurred by an industrial No. Go to line 1 Yes. Go to line 16b. Are your debts pring money for a busine No. Go to line 1 Yes. Go to line 1 | marily consumer debts? lividual primarily for a pers 16b. 17. marily business debts? ass or investment or throus | sonal, family, or househ Business debts are debi | ts that you incurred to obtain business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing under Cexpenses are pair | ler Chapter 7. Go to line 18. Chapter 7. Do you estimate t id that funds will be available | that after any exempt pro | perty is excluded and administrative ed creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5 ☐ 5,001-1 ☐ 10,001- | 0,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000 \$50,000 | 001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | □ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$10,000 \$50,000 | 001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | 11 | Constant de la constant | | Later and the same to the later and |
| For you | correct. If I have chosen to file un of title 11, United States under Chapter 7. | nder Chapter 7, I am award Code. I understand the r | e that I may proceed, if o | he information provided is true and eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed tho is not an attorney to help me fill |
| | out this document, I have | | | |
| | | · · · · · · · · · · · · · · · · · · · | | ode, specified in this petition. |
| | | uptcy case can result in fi | | money or property by fraud in imprisonment for up to 20 years, or |
| | /s/ Jasmine Utley | | × | |
| | Signature of Debtor 1 | | Signature of I | Debtor 2 |
| | | /2018 MM / DD / YYYY | Executed o | n |

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| Debtor 1 Jasmine | S | Utley | Case number (if k | (nown) |
|--|---------------------------|-----------------------|------------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12 | 2, or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | uired by 11 U.S.C. § | 342(b) and, in a case in w | hich § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | r an inquiry that the | information in the schedu | ules filed with the petition is incorrect. |
| attorney, you do not | | | | · |
| need to file this page. | /s/ Hilary L Jabs | | Date | 4/5/2018 |
| | Signature of Attorney | for Debtor | M | M / DD / YYYY |
| | - | | | |
| | | | | |
| | Hilary L Jabs | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Av | eniie | | |
| | Street | cride | | |
| | 0001 | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3122234975 | Email address | hjabs@semradlaw.com |
| | | | - | |
| | | | Illinois | |
| | Bar number | | State | |

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| Fill in this infor | mation to identify your ca | ase: | |
|---------------------------|----------------------------|-------------|----------------------|
| Debtor 1 | Jasmine | S | Utley |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--------------------------------------|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$14,817.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$14,817.00 |
| Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$15,979.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | 4.0,0.000 |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$72,813.00 |
| Your total liabilities | \$88,792.00 |
| art 3: Summarize Your Income and Expenses | |
| . Schedule I: Your Income (Official Form 106I) | |
| , | \$2,400.34 |
| Copy your combined monthly income from line 12 of Schedule I | |
| Copy your combined monthly income from line 12 of Schedule I | \$1,975.00 |

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| Debt | tor 1 Jasmine | S | Utley | Case number (if known) | |
|---------------|--|---|--------------------------------------|---|------------|
| | First Name | Middle Name | Last Name | | |
| Part 4 | 4: Answer Th | ese Questions for Administrat | ive and Statistical Records | | |
| 6. A ı | re you filing for ba | ankruptcy under Chapters 7, 11, o | r 13? | | |
| | No. You have n | othing to report on this part of the fo | orm. Check this box and submit th | is form to the court with your other so | hedules. |
| | Yes. | | | | |
| 7. W | hat kind of debt of | do you have? | | | |
| S | | e primarily consumer debts. Consu ehold purpose. 11 U.S.C. § 101(8). F | | | |
| | | e not primarily consumer debts. Yo court with your other schedules. | ou have nothing to report on this p | part of the form. Check this box and su | ıbmit |
| | | ent of Your Current Monthly Incom 11; OR, Form 122B Line 11; OR, Fo | | y income from Official | \$1,920.59 |
| 9. | Copy the following | ng special categories of claims fro | om Part 4, line 6 of Schedule E/l | F: | |
| | From Part 4 on S | Schedule E/F, copy the following: | | Total claim | |
| | 9a. Domestic sup | port obligations (Copy line 6a.) | | \$0.00 | |
| | 9b. Taxes and cer | tain other debts you owe the govern | ment. (Copy line 6b.) | \$0.00 | |
| | 9c. Claims for dea | th or personal injury while you were | intoxicated. (Copy line 6c.) | \$0.00 | |
| | 9d. Student loans | . (Copy line 6f.) | | \$65,851.00 | |
| | 9e. Obligations are priority claims. (Co | ising out of a separation agreement opy line 6g.) | or divorce that you did not report a | \$0.00 | |
| | 9f. Debts to pensi | on or profit-sharing plans, and other | similar debts. (Copy line 6h.) | \$0.00 | |

\$65,851.00

9g. **Total.** Add lines 9a through 9f.

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| | | | | | | _ | | | |
|-----------------------|--|---|---|-------------------------|--|-------------------------|---|---|--|
| Fill in this | information | to identify your c | ase: | | | | | | |
| Debtor 1 | Jasm | | S | | Utley | | | | |
| Debtor 2 | First | Name | Middle N | lame | Last Name | | | | |
| (Spouse, if f | iling) First | Name | Middle N | lame | Last Name | | | | |
| United St | ates Bankrup | otcy Court for the: | Northern | | District of Illinois | | | | |
| Case nun | abor | | | | (State) | | | | |
| (If known) | | | | | | | | | |
| Officia | al Form | 106A/B | | | | _ | | Check if this is an amended filing | |
| Sche | dule A | /B: Prope | rtv | | | | | 12/1 | |
| category responsib | where you t le for supply r name and | hink it fits best. E ying correct infor case number (if k | Be as complete a mation. If more s known). Answer e | nd ac pace very c | asset only once. If an asset fits in m curate as possible. If two married p is needed, attach a separate sheet juestion. TOther Real Estate You Own or | eople are to this fo | e filing together, both a orm. On the top of any a | are equally | |
| 1. Do yo | u own or ha | ve any legal or ed | quitable interest i | in any | residence, building, land, or simila | r propert | y? | | |
| ✓ | No. Go to | Part 2 | | | | | | | |
| | Yes. Where | is the property? | | | | | | | |
| 1.1 | | | | | It is the property? Check all that apply Single-family home | y. | the amount of any secu | claims or exemptions. Put ired claims on <i>Schedule D:</i> | |
| | Street addr | ess, if available, or | other description | | Duplex or multi-unit building | | Creditors Who Have Cla | aims Secured by Property. | |
| | | | | Ħ | Condominium or cooperative | | Current value of the Current value entire property? portion you | | |
| | | | | | Manufactured or mobile home | | | | |
| | Number | Street | | ш | Land | | Describe the nature of | f vour ownership | |
| | | | | | Investment property Timeshare | | interest (such as fee s the entireties, or a life | simple, tenancy by | |
| | City | State | Zip Code | | Other | | | e estatej, ii kilowii. | |
| | | | | | has an interest in the property? Ch | neck | Check if this is co | ommunity property | |
| | | | | one. | Debtor 1 only | | | | |
| | | | | _ | Debtor 2 only | | | | |
| | | | | Ħ | Debtor 1 and Debtor 2 only | | | | |
| | | | | | At least one of the debtors and another | r | | | |
| | | | | | er information you wish to add abou perty identification number: | ıt this ite | m, such as local | | |
| If you | own or have | e more than one, li | st here: | pi o _i | erty identification fidiliber. | | | | |
| | | | | Wha | t is the property? Check all that apply | y. | | claims or exemptions. Put | |
| 1.2 | Street addr | ess, if available, or | other description | Ш | Single-family home | | , | red claims on Schedule D: aims Secured by Property. | |
| | | | | | Duplex or multi-unit building | | Current value of the | Current value of the | |
| | - | | | | Condominium or cooperative | | entire property? | portion you own? | |
| | | | | | Manufactured or mobile home Land | | | | |
| | Number | Street | | | nvestment property | | Describe the nature of | | |
| | | | | Ħ | Timeshare | | interest (such as fee s the entireties, or a life | | |
| | City | State | Zip Code | | Other | | Check if this is co | ommunity property | |
| | | | | Who one. | has an interest in the property? Ch | reck | (see instructions) | | |
| | | | | | Debtor 1 only | | | | |
| | | | | | Debtor 2 only | | | | |
| | | | | | Debtor 1 and Debtor 2 only | | | | |
| | | | | | At least one of the debtors and another | r | | | |
| | | | | Oth | er information you wish to add abou | t thic ita | m such as local | | |

property identification number:

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| Debtor 1 | Jasmine | S | Utley | Case number (if known) |
|-----------|--|-------------------------|--|---|
| | First Name | Middle Name | Last Name | |
| | eet address, if available, or of | | What is the property? Check all that appl Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property | the amount of any secured claims or exemptions. Put the amount of any secured claims on Schedule Is Creditors Who Have Claims Secured by Property. Current value of the entire property? Describe the nature of your ownership interest (such as fee simple, tenancy by |
| City | y State | | Timeshare Other Who has an interest in the property? Complete Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | the entireties, or a life estate), if known. Check if this is community property (see instructions) |
| | | | Other information you wish to add abou property identification number: | ut this item, such as local |
| Part 2: | Describe Your Vehicle | es | > | |
| you own t | that someone else drives. If ans, trucks, tractors, sport u | you lease a vehicle, | at in any vehicles, whether they are reginalso report it on Schedule G: Executory Controlles | • |
| 3.1 | Model: Year: | Kia Sportage 2015 | Who has an interest in the propert one. Debtor 1 only | ty? Check Do not deduct secured claims or exemptions. Puthe amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property |
| | Approximate mileage: Other information: | 70000 | Debtor 2 only | Current value of the Current value of the entire property? portion you own? |
| | 2015 Kia Sportage | | Debtor 1 and Debtor 2 only At least one of the debtors and ar Check if this is community pro | |
| 3.2 | 2015 Kia Sportage Make Model: Year: Approximate mileage: | | At least one of the debtors and ar | nother |

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| Debtor 1 | Jasmine First Name | S Middle Name | Utley Last Name | Case numbe | r (if known) | |
|----------|-----------------------------|-----------------------|------------------------------------|----------------------|-----------------------|---|
| | | Middle Name | | | 5 | |
| 3.3 | Make Model: | | Who has an interest in the one. | ne property? Check | | claims or exemptions. Put ured claims on <i>Schedule D:</i> |
| | Year: | | Debtor 1 only | | | aims Secured by Property. |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 | only | entire property? | portion you own? |
| | Other information. | | At least one of the deb | • | | <u> </u> |
| | | | | | | |
| | | | Check if this is comminstructions) | nunity property (see | | |
| 3 / | Make | | Who has an interest in the | he property? Check | Do not deduct secured | claims or exemptions. Put |
| 0.4 | Model: | | one. | ne property: Oneck | | ured claims on Schedule D: |
| | Year: | | Debtor 1 only | | Creditors Who Have Cl | aims Secured by Property. |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 | only | entire property? | portion you own? |
| | | | At least one of the deb | • | | |
| | | | Check if this is comm | nunity property (see | | |
| | | | instructions) | , p. op, (| | |
| 4.1 | | | Who has an interest in the | he property? Check | | claims or exemptions. Put |
| | Model: Year: | | one. Debtor 1 only | | | ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 | only | entire property? | portion you own? |
| | outor information. | | At least one of the deb | • | · | |
| | | | Check if this is comm | | | |
| | | <u> </u> | instructions) | 31 31 | | |
| 4.2 | Make | | Who has an interest in the | he property? Check | Do not deduct secured | claims or exemptions. Put |
| | Model: | | one. | | | ured claims on Schedule D: |
| | Year: | | Debtor 1 only | | Creditors Who Have Cl | aims Secured by Property. |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 | only | entire property? | portion you own? |
| | | | At least one of the deb | tors and another | | |
| | | | Check if this is comminstructions) | nunity property (see | | |
| | the dollar value of the po | • | - | | | 3825.00 |
| you ha | ive attached for Part 2. Wi | rite that number here | ÷ | | <u>v</u> | |

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Utlev Debtor 1 Jasmine Case number (if known) First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Bedroom Set \$50.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Televisions (2) \$300.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Misc. Used Clothing \$250.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Misc. Jewelry \$50.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$980.00 for Part 3. Write that number here

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Utley Debtor 1 Jasmine Case number (if known) First Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: **PNC** \$12.00 17.2. Checking account: 17.3. Savings account: PNC \$0.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: Rush \$0.00 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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| Deb | for 1 Jasmine First Name | Middle Name | Last Name | Case number (if known) | |
|-----|--|---|---|---|--|
| 20. | Government and corpo Negotiable instruments i | prate bonds and other negotiab nclude personal checks, cashiers' ents are those you cannot transfer | le and non-negotiable checks, promissory no | tes, and money orders. | |
| | ✓ No Yes. Give specific information about them | Issuer name: | | | |
| | | | | | |
| 21. | | | thrift savings accounts | s, or other pension or profit-sharing plans | |
| | Yes. List each account | Type of account: 401(k) or similar plan: | Institution name: | | |
| | separately. | Pension plan: | | | |
| | | Retirement account: | | | |
| | | Keogh: Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments I deposits you have made so that with landlords, prepaid rent, public | | | |
| | Yes | Electric: | - | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or fo | r a number of years) | |
| | ✓ No ☐ Yes | Issuer name and description: | | | |
| | | - | | | |
| | | | | | |
| | | | | | |

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| Debto | or 1 Jasmine | S | Utley | Case number (if known) | |
|------------|---|---|---|---|--|
| 0.4 | First Name | Middle Name | Last Name | | |
| 24. | | n education IRA, in an account ii 530(b)(1), 529A(b), and 529(b)(1). | n a qualified ABLE program, or u | nder a qualified state tuition program. | |
| | Ves | Institution name and description. S | eparately file the records of any inte | rests.11 U.S.C. § 521(c): | |
| | | | | | |
| 25. | | able or future interests in propert | y (other than anything listed in li | ne 1), and rights or powers | |
| | exercisable f | or your benefit | | | |
| | Yes. Desc | ribe | | | |
| 26. | | rights, trademarks, trade secretemet domain names, websites, proc | | | |
| | ✓ No Yes. Desc | ribe | | | |
| 0.7 | | | .:hl | | |
| 27. | Examples: Bu | nchises, and other general intang Iding permits, exclusive licenses, co | | or licenses, professional licenses | |
| | ✓ No | | | | |
| | Yes. Desc | ribe | | | |
| | | | | | |
| | | | | | |
| Mon | ey or propei | ty owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ey or propei | | | | portion you own? Do not deduct secured |
| | Tax refunds o | | | | portion you own? Do not deduct secured |
| | Tax refunds o | | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds or No Yes. Give sabou | wed to you | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds or No Yes. Give sabou | wed to you specific information t them, including whether | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds or No Yes. Give sabout you a and to | specific information t them, including whether already filed the returns he tax years | support, child support, maintenan | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, spousa | support, child support, maintenan | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information t them, including whether already filed the returns he tax years | support, child support, maintenan | State: Local: ce, divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, spousa | support, child support, maintenan | State: Local: ce, divorce settlement, property settlemen Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, spousa | support, child support, maintenan | State: Local: ce, divorce settlement, property settlemen Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, spousa | support, child support, maintenan | State: Local: ce, divorce settlement, property settlemen Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 28. 29. | Tax refunds or No Yes. Give s about you a and to Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, spousa specific information | nents, disability benefits, sick pay, v | State: Local: Ce, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. 29. | Tax refunds or No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information t them, including whether already filed the returns he tax years | nents, disability benefits, sick pay, v | State: Local: Ce, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. 29. | Tax refunds or No Yes. Give s about you a and to Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information t them, including whether already filed the returns he tax years t due or lump sum alimony, spousa specific information s someone owes you aid wages, disability insurance payn all Security benefits; unpaid loans you | nents, disability benefits, sick pay, v | State: Local: Ce, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Jasmine | S | Utley | Case number (if known) | |
|------|---|----------------------------|--|--|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance Examples: Health, disab | | lth savings account (HSA); credit, | homeowner's, or renter's insurance | |
| | Yes. Name the insu of each policy and | | Company name: | Beneficiary: | Surrender or refund value: |
| | | | | | |
| 32. | | | | icy, or are currently entitled to receive | |
| | No Yes. Describe | | | | |
| 33. | | | you have filed a lawsuit or made trance claims, or rights to sue | e a demand for payment | |
| | ✓ No Yes. Describe | | | | |
| 34. | Other contingent and to set off claims | unliquidated claims of | every nature, including counter | rclaims of the debtor and rights | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 35. | Any financial assets y | ou did not already list | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 36. | | - | n Part 4, including any entries t | | \$12.00 |
| | | | | | |
| Part | 5: Describe Any R | usiness-Related Pro | nerty You Own or Have an | Interest In. List any real estate in Part | 1 |
| | _ | | terest in any business-related p | | |
| 37. | - | ., .ogai oi equitable IIII | orosem any business-relateu p | | irrent value of the |
| | No. Go to Part 6. Yes. Go to line 38. | | | po Do | ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable of | or commissions you alre | eady earned | OI . | exemptions |
| | ✓ No Yes. Describe | | | | |
| 39. | Office equipment, furn Examples: Business-rela | | , modems, printers, copiers, fax m | nachines, rugs, telephones, desks, chairs, electro | onic devices |
| | No Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 Jasmine | S | Utley | Case number (if known) | |
|----------|--------------------------------|------------------------------------|---------------------------------|--|---------------------------------------|
| | First Name | Middle Name | Last Name | | |
| 40. | Machinery, fixtures, e | equipment, supplies you u | se in business, and tools of y | our trade | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | - | | | | |
| 41. | Inventory | | | | |
| | √ No | | | | |
| | Yes. Describe | | | | |
| | Ш | | | | |
| | | <u> </u> | | | |
| 42. | Interests in partners | nips or joint ventures | | | |
| | ✓ No | | | | |
| | Yes. Give specific | ١ | Name of entity: | % of ownership: | |
| | information about | | | | |
| | them | - | | · - | |
| | | _ | | | _ |
| | | | | | |
| 43. | Customer lists, mailing | g lists, or other compilation | ons | | |
| | | ,, | | | |
| | No | | | | |
| | Yes. Do your lists | include personally identifiable | e information (as defined in 11 | U.S.C. § 101(41A))? | |
| | ☐ No | | | | |
| | | cribe | | | |
| | | | | | |
| 44. | Any business-related | property you did not alrea | ady list | | |
| | No. | | | | |
| | No | - | | | |
| | Yes. Give specific information | | | | |
| | information | · - | | | |
| | | - | | | <u> </u> |
| | | | | | |
| | | - | | | |
| | | ·- | | | |
| | | _ | | | |
| | | | | | |
| 45. A | dd the dollar value of | all of your entries from Pa | rt 5, including any entries for | pages you have attached | |
| | | | | | |
| <u> </u> | Deceribe Any F | 'awaa awal Oawawaawaial | Fishing Deleted Duenest | ···V···· O······ o·· I lovo o··· Into ··· o t lo | |
| Part | If you own or have a | n interest in farmland, list it in | Part 1 | y You Own or Have an Interest In. | |
| | | | | | |
| 46. | Do you own or have a | any legal or equitable inte | rest in any farm- or commerc | cial fishing-related property? | |
| | No. Go to Part 7. | | | | Current value of the portion you own? |
| | Yes. Go to line 47 | | | | Do not deduct secured claims |
| | | | | | or exemptions |
| 47. | Farm animals | | | | |
| | Examples: Livestock, p | oultry, farm-raised fish | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |

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| Debt | or 1 Jasmine First Name | | Jtley .ast Name | Case number (if known) | |
|----------------|----------------------------|--|------------------------|------------------------------|--------------|
| 48. | Crops-either growing | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 49. | Farm and fishing equip | pment, implements, machinery, fixtur | es, and tools of trade | | |
| | No No | | | | |
| | Yes. Describe | | | | |
| 50. | Farm and fishing sunn | lies, chemicals, and feed | | | |
| 00. | No | nes, onemous, and reed | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 51. | Any farm- and comme | rcial fishing-related property you did | not already list | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | - | | | | |
| | | II of your entries from Part 6, includin | | | |
| • | rt o. write that humbe | i liele | | | |
| | | | | | |
| Part 7 | Describe All Pro | perty You Own or Have an Intere | est in That You Did N | lot List Above | |
| 53. | Do you have other pro | perty of any kind you did not already l | | | |
| | | s, country club membership | | | |
| | ✓ No Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| 54. Ac | ld the dollar value of a | ll of your entries from Part 7. Write th | at number here | | > |
| 0 11 710 | ia ino aonai valao ol a | ii or your ontrioo iroiii i ure ii mitto tii | at named note minim | | |
| | | | | | |
| | | | | | |
| 5 | l ist the Totals of | f Facili Davit of this Favor | | | |
| Part 8 | List the Totals of | f Each Part of this Form | | | |
| 55. P | art 1: Total real estate | e, line 2 | | ···· | |
| 56. p | art 2 total vehicles, lin | ne 5 | \$13825.00 | | |
| 57. P a | art 3: Total personal ar | nd household items, line 15 | \$980.00 | | |
| 58. P | art 4: Total financial as | ssets, line 36 | \$12.00 | | |
| 59. P | art 5: Total business-r | elated property, line 45 | 412.00 | | |
| 60. P | art 6: Total farm- and | fishing-related property, line 52 | | | |
| 61. P | art 7: Total other prop | erty not listed, line 54 | | | |
| 62. T | otal personal property | . Add lines 56 through 61 | \$14817.00 | | + \$14817.00 |
| | | | + | Copy personal property total | |
| | | | | | \$14817.00 |
| 63. T c | otal of all property on S | Schedule A/B. Add line 55 + line 62 | | | |

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| Debtor 1 | Jasmine | S | Utley | Case number (if known) | |
|----------|------------|-------------|-----------|------------------------|--|
| | First Name | Middle Name | Last Name | | |

Schedule A/B: Property. Additional page

| Part 3: Describe Your Personal and Household Items | | | | | | |
|--|--|----------|--|--|--|--|
| Do you own or ha | Current value of the portion you own? Do not deduct secured claims or exemptions. | | | | | |
| 6.2. Household goo | ds and furnishings | | | | | |
| No | | | | | | |
| Yes. Describe | Living Room Set | \$50.00 | | | | |
| 6.3. Household goo | ds and furnishings | | | | | |
| No | | | | | | |
| Yes. Describe | Kitchen Table & Chairs | \$30.00 | | | | |
| 7.2. Electronics | | | | | | |
| No | | | | | | |
| Yes. Describe | Computer | \$200.00 | | | | |
| 7.3. Electronics | | | | | | |
| No | | | | | | |
| Yes. Describe | Cell Phone | \$50.00 | | | | |

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| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Jasmine | S | Utley | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States B | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (Otalo) | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pai | t 1: Identify the Property You Claim | as Exempt | | | | | |
|-----|--|--------------------------------------|---|--|--|--|--|
| 1. | . Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. | | | | | | |
| | You are claiming state and federal n | onbankruptcy exemp | otions. 11 U.S.C. § 522(b)(3) | | | | |
| | You are claiming federal exemptions | s. 11 U.S.C. § 522(b)(2 | 2) | | | | |
| 2. | For any property you list on Schedule A/ | B that you claim as e | xempt, fill in the information below. | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | |
| | | Copy the value from Schedule A/B | | | | | |
| | Brief description: Kia Sportage, 2015, 2015 Kia Sportage Line from Schedule A/B: 03 | \$13,825.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) | | | |
| | Brief description: | \$50.00 | \$50.00 | 735 ILCS 5/12-1001(b) | | | |
| | Bedroom Set Line from Schedule A/B: 06 | | 100% of fair market value, up to any applicable statutory limit | • | | | |
| 3. | ✓ No | y 3 years after that for o | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? | | | | |

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Debtor 1 Jasmine S Utley Case number (if known)
First Name Middle Name Last Name

| Brief description of the property and ine on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exempti |
|--|---|---|----------------------------------|
| Brief description: Living Room Set | \$50.00 | \$50.00 100% of fair market value, up to any | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B:06 | | applicable statutory limit | |
| Brief description: | \$30.00 | \$30.00 | 735 ILCS 5/12-1001(b) |
| Kitchen Table & Chairs Line from Schedule A/B: 06 | | 100% of fair market value, up to any applicable statutory limit | _ |
| Brief description: | \$50.00 | \$50.00 | 735 ILCS 5/12-1001(b) |
| Misc. Jewelry Line from Schedule A/B: 12 | <u></u> | \$50.00 100% of fair market value, up to any applicable statutory limit | _ |
| Brief lescription: | \$250.00 | \$250.00 | 735 ILCS 5/12-1001(a) |
| Misc. Used Clothing Line from Schedule A/B: 11 | | 100% of fair market value, up to any applicable statutory limit | _ |
| Brief lescription: | \$300.00 | \$300.00 | 735 ILCS 5/12-1001(b) |
| Televisions (2) ine from Schedule A/B: 07 | | 100% of fair market value, up to any applicable statutory limit | _ |
| Brief lescription: | \$200.00 | 7 | 735 ILCS 5/12-1001(b) |
| Computer ine from Schedule A/B: 07 | | \$200.00 100% of fair market value, up to any applicable statutory limit | _ |
| Brief description: | \$50.00 | \$50.00 | 735 ILCS 5/12-1001(b) |
| Cell Phone Line from Schedule A/B: 07 | | \$50.00 100% of fair market value, up to any applicable statutory limit | _ |
| Brief lescription: | \$12.00 | V \$12.00 | 735 ILCS 5/12-1001(b) |
| Checking account, PNC Line from Schedule A/B: 17 | | \$12.00 100% of fair market value, up to any applicable statutory limit | _ |
| Brief lescription: | \$0.00 | \$0 | 735 ILCS 5/12-1001(b) |
| Savings account, PNC ine from Schedule A/B: 17 | | 100% of fair market value, up to any applicable statutory limit | _ |
| Brief lescription: | \$0.00 | 7 | 735 ILCS 5/12-1001(b) |
| Other financial account, Rush | | \$0 100% of fair market value, up to any applicable statutory limit | _ |

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| | | Doo | cument Page 23 of | 82 | | |
|-------------------------|---|--|---|--|--|-----------------------------------|
| Fill in this info | rmation to identify your cas | se: | | | | |
| Debtor 1 | Jasmine First Name | S Middle Neme | Utley | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| Case number (If known) | | | (State) | | | |
| Official | Form 106D | | | J | | Check if this is a amended filing |
| Schedi | ule D: Credito | ors Who Hav | e Claims Secure | ed by Prop | | 12/1 |
| No. Yes Part 1: List | creditors have claims see Check this box and subm . Fill in all of the information the All Secured Claims secured claims. If a credit | it this form to the court was below. | rith your other schedules. You hav | ve nothing else to repo | ort on this form. Column B | <i>Column</i> C |
| separat | ely for each claim. If more th | an one creditor has a parti | cular claim, list the other creditors order according to the creditor's | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| 2.1 KIA MC | OTORS FINANCE | Describe the property | that secures the claim: | \$15,979.00 | \$13,825.00 | \$2,154.00 |
| FOUNT VALLE City Who or | DX 20815 ber Street | Contingent Unliquidated Disputed Nature of lien. Check al An agreement you n car loan) | the claim is: Check all that apply. I that apply. nade (such as mortgage or secured as tax lien, mechanic's lien) | | | |
| | least one of the debtors | Judgment lien from | a lawsuit | | | |
| _ | d another eck if this claim relates | Other (including a rig | ght to offset) | | | |
| □ to | a community debt ebt was <u>10/2014</u> | Last 4 digits of accoun | t number 9901 | | | |

here:

\$15,979.00

Add the dollar value of your entries in Column A on this page. Write that number

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S Utley Debtor 1 Jasmine Case number (if known) First Name Middle Name Last Name List Others to Be Notified for a Debt That You Already Listed Part 2: Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? NATIONAL REGISTERED AGENTS INC 2.1 Name 208 SO LASALLE ST, SUITE 814 Last 4 digits of account number Number Street Chicago 60604 Illinois City State Zip Code On which line in Part 1 did you enter the creditor? ROSS C WILLIAMS 2.1 Name 3161 MICHELSON DR #190 Last 4 digits of account number 9901 Number Street 92612 Irvine California City State Zip Code

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| | | Du | Jumeni Paye 2 | 5 01 62 | | | |
|---|---|--|--|--|-------------------------------|----------------------------------|-------------------------------|
| Fill in this inf | ormation to identify your case: | | | | | | |
| Debtor 1 | Jasmine S | | Utley | | | | |
| Debtor 2 | First Name M | iddle Name | Last Name | | | | |
| (Spouse, if filing) | First Name M | iddle Name | Last Name | _ | | | |
| United States | Bankruptcy Court for the: Northern | | District of Illinois | | | | |
| Case numbe (If known) | r | | (State) | _ | | | |
| Official | Form 106E/F | | | | Che | ck if this is ar | amended filing |
| Sched | lule E/F: Creditor | s Who | Have Unsec | ured Claims | . | | 12/15 |
| Form 106A/E claims that a the entries in known). | o any executory contracts or unexpir s) and on Schedule G: Executory Con are listed in Schedule D: Creditors Wi n the boxes on the left. Attach the Co | tracts and Une ho Hold Claims ontinuation Pag | xpired Leases (Official For Secured by Property. If m | m 106G). Do not include a ore space is needed, copy | any creditor y the Part yo | s with partia ou need, fill i | illy secured t out, number |
| Z. List all listed, ic As much Continu | creditors have priority unsecured cl b. Go to Part 2. S. of your priority unsecured claims. If dentify what type of claim it is. If a claim h as possible, list the claims in alphabet lation Page of Part 1. If more than one of explanation of each type of claim, see the | a creditor has m has both priorit tical order accord creditor holds a p | ore than one priority unsecu , and nonpriority amounts, li ing to the creditor's name. I particular claim, list the other | ist that claim here and show f you have more than two p creditors in Part 3. | both priority | and nonprio | rity amounts. |
| (i oi aii | explanation of each type of claim, see the | ne mondonono n | | bookiet.) | Total claim | Priority amount | Nonpriority amount |
| 0.4 Illin aig | Department of Devenue | | | | | | |
| Priority | s Department of Revenue y Creditor's Name | | ast 4 digits of account nu | | \$0.00 | \$0.00 | \$0.00 |
| PO Bo | ox 64338 er Street | v | /hen was the debt incurre | d? n/a | | | |
| | | | s of the date you file, the opply. | claim is: Check all that | | | |
| Chica City Who i | | Г | Contingent Unliquidated Disputed | | | | |
| ✓ D | ebtor 1 only | L T | ⊒ ^{Disputed} ype of PRIORITY unsecure | ed claim: | | | |
| | ebtor 2 only | · | Domestic support obligat | | | | |
| | ebtor 1 and Debtor 2 only | Ī | Taxes and certain other d | ebts you owe the | | | |
| | t least one of the debtors and another | | government Claims for death or perso | inal injury while you wero | | | |
| | heck if this claim relates to a comm claim subject to offset? | unity debt L | intoxicated | ma injury withe you were | | | |
| is the | ciaim subject to onset? | | Other. Specify | | | | |

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Debtor 1 Jasmine Utlev Case number (if known) First Name Middle Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** ATT SERVICES 4.1 \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO BOX 192830 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Puerto Rico SAN JUAN 00919 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify Cell Phone Bill Is the claim subject to offset? No Yes Bank of America \$100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 982236 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated El Paso 79998 Texas Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Bank Fees Is the claim subject to offset? **✓** No Yes City of Chicago - Dep't of Revenue \$300.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 88292 n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60608 Chicago Illinois City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify Redlight Camera Ticket Is the claim subject to offset? Official Yes 106E/F Schedule E/F: Creditors Who Have Unsecured Claims page 2

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 Debtor 1 Jasmine
 S
 Utley
 Case number (lif known)

 First Name
 Middle Name
 Last Name

| After listing any entries on this page, number them beginn | ing with 4.5, followed by 4.6, and so forth. | Total claim | | |
|--|---|-------------|--|--|
| ComEd | Lord Addition of a constant of the constant | \$400.00 | | |
| Nonpriority Creditor's Name 3 Lincoln Center | Last 4 digits of account number When was the debt incurred? n/a | Ψ-00.00 | | |
| Number Street | As of the date of the the old to be Observed that each | | | |
| Bankruptcy Section | As of the date you file, the claim is: Check all that apply. | | | |
| | Contingent | | | |
| Oakbrook Terrace Illinois 60181 | Unliquidated | | | |
| City State Zip Code | Disputed | | | |
| Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | |
| Debtor 2 only | Student loans | | | |
| Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | |
| Check if this claim relates to a community debt | Other. Specify Electric Bill | | | |
| Is the claim subject to offset? No | | | | |
| ∐ Yes | | | | |
| COMENITYBANK/VICTORIA Nonpriority Creditor's Name | Last 4 digits of account number 4391 | \$91.00 | | |
| 220 W SCHROCK RD | When was the debt incurred? 9/2014 | | | |
| Number Street | As of the date you file, the claim is: Check all that apply. | | | |
| | Contingent | | | |
| WESTERVILLE Ohio 43081 | Unliquidated | | | |
| City State Zip Code | Disputed | | | |
| Who incurred the debt? Check one. Debtor 1 only | | | | |
| <u> </u> | Type of NONPRIORITY unsecured claim: | | | |
| Debtor 2 only | Student loans | | | |
| Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | |
| At least one of the debtors and another | divorce that you did not report as priority claims | | | |
| Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | |
| Is the claim subject to offset? | Other. Specify CreditCard | | | |
| ✓ No | | | | |
| Yes | | | | |
| CONVERGENT OUTSOURCING | Last 4 digits of account number 4091 | \$1,897.00 | | |
| Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200 | When was the debt incurred? 10/2016 | | | |
| Number Street | when was the dept incurred: | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| House Tours 77040 | Contingent | | | |
| Houston Texas 77043 City State Zip Code | Unliquidated | | | |
| Who incurred the debt? Check one. | Disputed | | | |
| Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | |
| Debtor 2 only | Student loans | | | |
| Debtor 1 and Debtor 2 only | 불 | | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | |
| Is the claim subject to offset? | 001 Collection; Collecting for | | | |
| No | ORIGINAL CREDITOR: T-MOBILE | | | |
| | Other. Specify USA | | | |

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 Debtor 1 Jasmine
 S
 Utley
 Case number (lif known)

 First Name
 Middle Name
 Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | Page | | | |
|--------|--|---|-------------|--|--|
| | After listing any entries on this page, number them beginning wi | th 4.5, followed by 4.6, and so forth. | Total claim | | |
| 4.7 | CREDIT MANAGEMENT LP | Last 4 digits of account number 1538 | \$557.00 | | |
| | Nonpriority Creditor's Name 4200 INTERNATIONAL PKWY | When was the debt incurred? 11/2017 | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | |
| | | Contingent | | | |
| | CARROLLTON Texas 75007 | — Unliquidated | | | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 2 only | Student loans | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Is the claim subject to offset? | 001 Collection; Collecting for | | | |
| | ✓ No | ORIGINAL CREDITOR: COMCAST Other. Specify CABLE | | | |
| | Yes | Other. Opecity | | | |
| 4.8 | CREDITORS DISCOUNT & A | | \$306.00 | | |
| 1.0 | Nonpriority Creditor's Name | Last 4 digits of account number 7954 | | | |
| | 415 E MAIN ST Number Street | When was the debt incurred? 5/2015 | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | |
| | | Contingent | | | |
| | STREATOR Illinois 61364 | Unliquidated | | | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 2 only | Student loans | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | | | |
| | Check if this claim relates to a community debt | debts | | | |
| | Is the claim subject to offset? | 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL | | | |
| | ✓ No | Other. Specify PAYMENT DATA | | | |
| | Yes | | | | |
| 4.9 | DEPT OF ED/NAVIENT | | \$8,015.00 | | |
| 4.5 | Nonpriority Creditor's Name | Last 4 digits of account number 0817 | Ψ0,013.00 | | |
| | PO BOX 9635 Number Street | When was the debt incurred? 8/2014 | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | |
| | WILKES BARRE Pennsylvania 18773 | Contingent | | | |
| | City State Zip Code | Unliquidated | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | | | |
| | <u></u> | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 2 only | Student loans | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | | | |
| | Check if this claim relates to a community debt | debts | | | |
| | Is the claim subject to offset? | Other. Specify | | | |
| | ✓ No | | | | |
| | Yes | | | | |

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Utley Debtor 1 Jasmine Case number (if known) First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 DEPT OF ED/NAVIENT \$7,949.00 Last 4 digits of account number 0114 Nonpriority Creditor's Name When was the debt incurred? 1/2013 PO BOX 9635 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.11 DEPT OF ED/NAVIENT \$7,625.00 0815 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 8/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.12 DEPT OF ED/NAVIENT \$6,789.00 Last 4 digits of account number 1027 Nonpriority Creditor's Name When was the debt incurred? 10/2008 PO BOX 9635 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset?

No Yes

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Utley Debtor 1 Jasmine Case number (if known) First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 DEPT OF ED/NAVIENT \$5,619.00 Last 4 digits of account number 0817 Nonpriority Creditor's Name When was the debt incurred? 8/2014 PO BOX 9635 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.14 DEPT OF ED/NAVIENT \$5,609.00 0815 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 8/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.15 DEPT OF ED/NAVIENT \$4,669.00 Last 4 digits of account number 0817 Nonpriority Creditor's Name When was the debt incurred? 8/2013 PO BOX 9635 Number As of the date you file, the claim is: Check all that apply. Contingent 18773 WILKES BARRE Pennsylvania Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts

No Yes

Is the claim subject to offset?

Other. Specify

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Utley Debtor 1 Jasmine Case number (if known) First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 DEPT OF ED/NAVIENT \$3,820.00 Last 4 digits of account number 0817 Nonpriority Creditor's Name When was the debt incurred? 8/2013 PO BOX 9635 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.17 DEPT OF ED/NAVIENT \$3,616.00 0114 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.18 DEPT OF ED/NAVIENT \$3,062.00 Last 4 digits of account number 0723 Nonpriority Creditor's Name When was the debt incurred? 7/2010 PO BOX 9635 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

debts Other. Specify

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Utley Debtor 1 Jasmine Case number (if known) First Name Middle Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 DEPT OF ED/NAVIENT \$3,046.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5/2014 PO BOX 9635 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.20 DEPT OF ED/NAVIENT \$2,672.00 1027 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 10/2008 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.21 DEPT OF ED/NAVIENT \$1,798.00 Last 4 digits of account number 0806 Nonpriority Creditor's Name When was the debt incurred? PO BOX 9635 8/2009 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

debts Other. Specify

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Debtor 1 Jasmine Utley Case number (if known) Last Name First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim**

| 4.22 | DEPT OF ED/NAVIENT | — Last 4 digits of account number 0806 - | \$1,562.00 | | | |
|------|---|---|------------|--|--|--|
| | Nonpriority Creditor's Name PO BOX 9635 | When was the debt incurred? 8/2009 | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. Contingent | | | | |
| | WILKES BARRE Pennsylvania 18773 | — Unliquidated | | | | |
| | City State Zip Code | | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | | | | |
| | <u> </u> | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | | | | |
| | Check if this claim relates to a community debt | debts | | | | |
| | Is the claim subject to offset? | Other. Specify | | | | |
| | ✓ No | _ | | | | |
| | Yes | | | | | |
| 4.23 | Illinois Department of Employment Security | Last 4 digits of account number | \$1,300.00 | | | |
| | Nonpriority Creditor's Name PO Box 4385 | When was the debt incurred? | | | | |
| | Number Street | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | |
| | | — Contingent | | | | |
| | Chicago Illinois 60680 | Unliquidated | | | | |
| | City State Zip Code | Disputed Type of NONPRIORITY unsecured claim: | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | | | | | |
| | Debtor 2 only | Student loans | | | | |
| | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | Debtor 1 and Debtor 2 only | | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Check if this claim relates to a community debt | Other. Specify Over-Payment of Benefits | | | | |
| | Is the claim subject to offset? | _ | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |
| 4.24 | Illinois Tollway | Last 4 digits of account number | \$200.00 | | | |
| | Nonpriority Creditor's Name 2700 Ogden Ave | When was the debt incurred? n/a | | | | |
| | Number Street | As of the date you file the plain is Chook all that apply | | | | |
| | Legal Dept | As of the date you file, the claim is: Check all that apply. — Contingent | | | | |
| | | | | | | |
| | Downers Grove Illinois 60515 | Unliquidated | | | | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Check if this claim relates to a community debt | Other. Specify Tollway Violations | | | | |
| | Is the claim subject to offset? | _ | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |

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Debtor 1 Jasmine Utley Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.25 SOURCE RECEIVABLES MNG \$811.00 - Last 4 digits of account number 0048 Nonpriority Creditor's Name 4615 DUNDAS DR STE 102 When was the debt incurred? 12/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent **GREENSBORO** North Carolina 27407 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: SPRINT **✓** No

Yes

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| Debtor 1 | Jasmine First Name | | S Middle Name | Utley Last Name | Case number (if known) | | |
|--------------|---|--|--------------------|---|------------------------|--|--|
| Part 3: | Part 3: List Others to Be Notified About a Debt That You Already Listed | | | | | | |
| coll coll | 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. | | | | | | |
| | HARRIS & HARRIS LTD Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| | 111 W JACKSON BLVD S-400 Number Street | | Line 4.3 of (Cone) | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| CH City | ICAGO Illin y Sta | | 60604 Zip Code | Last 4 digits of accoun | number | | |

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 Debtor 1
 Jasmine First Name
 S
 Utley
 Case number (if known)

 Last Name
 Last Name

Add the Amounts for Each Type of Unsecured Claim Part 4: 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b. \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$65,851.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$6,962.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$72,813.00 6j. Total. Add lines 6f through 6i. 6j.

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| Fill in this information to identify your case: | | | | |
|---|------------|-------------|------------------------------|---|
| Debtor 1 | Jasmine | S | Utley | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | _ |
| Case number (If known) | | | (2) | _ |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or com | pany with whom you have | the contract or lease | State what the contract or lease is for |
|--|-------------------------|-----------------------|---|
| .1 Salem Cross Ap Name 18700 Burnhar | | | Residential Lease, Debtor is Lessee, Yearly Lease |
| Number | Street | | |
| Lansing | Illinois | 60438 | |
| City | State | Zip Code | |

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| | | | | 0 00 01 02 |
|------------------------|----------------------------|---|---------------------------|---|
| Fill in this info | rmation to identify your c | case: | | |
| Debtor 1 | Jasmine | S | Utley | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States I | Bankruptcy Court for the: | Northern | District of Illinois | |
| O | | | (State) | |
| Case number (If known) | | | | |
| | | | | Check if this is an amended filing |
| Ott: 0: 01 | Farms 10011 | | | arrended ming |
| Official | Form 106H | | | |
| Schodul | e H: Your Co | lahtare | | 12/15 |
| Scriedui | e n. Tour Cot | JEDIOI 2 | | 12/13 |
| known). Answ | er every question. | ttach the Additional Page | | op of any Additional Pages, write your name and case number (if a codebtor.) |
| Yes | | | | |
| | | lived in a community pro xico, Puerto Rico, Texas, W | | ? (Community property states and territories include Arizona, California, n.) |
| ✓ No. | Go to line 3. | | | |
| Yes | . Did your spouse, forme | er spouse, or legal equiva | lent live with you at the | time? |
| | No | | | |
| | Yes. In which communi | ty state or territory did you | ı live? | Fill in the name and current address of that person. |
| | Name of your spouse, | former spouse, or legal equ | ivalent | |
| | Number Street | | | |
| | City | State | Zip Co | ode . |
| 3. In Colum | n 1. list all of vour code | btors. Do not include vou | r spouse as a codebtor | if your spouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| Fill in this inf | ormation to identify | your case: | | - | | | |
|---|--|---|---|--------------------|---------------------|--|--------------|
| Debtor 1 Debtor 2 | Jasmine First Name | S Middle Name | Utley Last N | | | ck if this is: An amended filing | |
| (Spouse, if filing) United States the: | First Name Bankruptcy Court for | Middle Name Northern | Last Nate Nast Nate Nate Nate Nate Nate Nate Nate Nat | | | A supplement showing post-petition expenses as of the following date: | n chapter 13 |
| Case number (If known) | | | | , | - i | MM / DD / YYYY | |
| Official | Form 106I | | | | | | |
| Schedu | e I: Your In | come | | | | | 12/15 |
| information a spouse. If mo number (if kn | bout your spouse. I | f you are separated and, attach a separate she y question. | d your spous | se is not filing | with you, do | r spouse is living with you, incl not include information about onal pages, write your name a | your |
| Fill in you information | r employment | | Debtor 1 | | | Debtor 2 | |
| If you have attach a se information | e more than one job, parate page with a about additional | Employment status | Emplo Not En | yed nployed | | Employed Not Employed | |
| employers. Include pa self-emplo | t time, seasonal, or | Occupation Employer's name | Burlington | Coat Factory | | | |
| | n may include student aker, if it applies. | Employer's address | 1830 US-1 Number Str | | | Number Street | |
| | | | Burlington City | New Jerse State | y 08016 Zip Code | City State Zip | o Code |
| | | How long employed there? | 8 months | | | | |
| Part 2: Giv | e Details About M | Ionthly Income | | | | | |
| spouse unles | s you are separated. | e more than one employer, | - | information for a | | vrite \$0 in the space. Include your in that person on the lines below. If For Debtor 2 or non-filing spouse | |
| | | rry, and commissions (befo calculate what the monthly | | 2. | \$934.14 | | |
| | e and list monthly over | | | 3. | + \$0.00 | | |
| 4. Calculat | e gross income. Add li | ne 2 + line 3. | | 4. | \$934.14 | | |

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| Depto | or 1Jasmine First Name | | Jtley _ast Name | Case numbei known) | | |
|-----------------------|---|---|---------------------|------------------------|-----------------------------------|-------------------------|
| | , not raine | mado namo | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Cop | y line 4 here | | → 4. | \$934.14 | | |
| 5. List | all payroll ded | | | | | |
| 5a. | Tax, Medicare, | and Social Security deductions | 5a. | \$99.80 | | |
| 5b. | . Mandatory con | tributions for retirement plans | 5b. | \$0.00 | | |
| 5c. | Voluntary cont | ributions for retirement plans | 5c. | \$0.00 | | |
| 5d. | Required repay | ments of retirement fund loans | 5d. | \$0.00 | | |
| 5e. | Insurance | | 5e. | \$0.00 | | |
| 5f. | Domestic suppo | ort obligations | 5f. | \$0.00 | | |
| 5g. | Union dues | | 5g. | \$0.00 | | |
| 5h. | Other deduction | ons. Specify: | _ 5h. + | \$0.00 + | | |
| 6. Add +5h. | the payroll ded | luctions. Add lines 5a + 5b + 5c + 5d + 5e +5f | f + 5g 6. | \$99.80 | | |
| 7. Cal | culate total mo | nthly take-home pay. Subtract line 6 from line | 4. 7. | \$834.34 | | |
| 8. List | all other incom | ne regularly received: | | | | |
| 8a. | business, profe | m rental property and from operating a ssion, or farm ant for each property and business showing | | | | |
| | gross receipts, c | rdinary and necessary business expenses, and | _ | 4500.00 | | |
| 0.1 | the total monthly | • | 8a. | \$520.00 | | |
| | Interest and di | | 8b. | \$0.00 | | |
| 8c. | dependent reg | - | a | | | |
| | | spousal support, child support, maintenance, nt, and property settlement. | 8c. | \$0.00 | | |
| 8d. | Unemployment | compensation | 8d. | \$0.00 | | |
| 8e. | Social Security | , | 8e. | \$0.00 | | |
| | Include cash ass cash assistance under the Supple housing subsidie Specify: | ent assistance that you regularly receive istance and the value (if known) of any non-that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or as Programs Income | 8f. | \$646.00 | | |
| 8a | • | rement income | 8g. | \$0.00 | | |
| 8h. | Other monthly | income. Specify: | 8h. + | \$400.00 + | | |
| | | <u>come Tax Refund</u> ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + | - 8h. 9. | \$1,566.00 | | |
| | | income. Add line 7 + line 9. e 10 for Debtor 1 and Debtor 2 or non-filing sp | 10. | \$2,400.34 + | = | \$2,400.34 |
| Inc frie | elude contribution nds or relatives. | gular contributions to the expenses that you s from an unmarried partner, members of your amounts already included in lines 2-10 or amou | household, your o | lependents, your roomn | | |
| | ecify: | • | | , , , , , , , | 11. | + \$0.00 |
| | | | | | | |
| | | n the last column of line 10 to the amount in In the Summary of Schedules and Statistical Sur | | | , | \$2,400.34 |
| | | | | | | Combined monthly income |
| 13. D c | you expect an | increase or decrease within the year after y | you file this form? | • | | · |
| | Yes. Explain: | | | | | |
| - | _ ` | | | | | |

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Case number (if

known)

Utley

Last Name

S

Middle Name

Debtor 1Jasmine

First Name

| Official Form 1061. Additional page. | | | | | |
|---|----------|----------|--------------|----------|--|
| 8a.Net income from rental property and from operating a business, profession, or farm | | | | | |
| 8a.1 Business and Self Employment: Uber | Debtor 1 | Debtor 2 | | | |
| Gross receipts (before all deductions) | \$340.00 | | | | |
| Ordinary and necessary operating expenses | -\$0.00 | | | | |
| Net monthly income from a business, profession, or farm | \$340.00 | | Copy here | \$340.00 | |
| 8a.2 Business and Self Employment: Grub Hub | Debtor 1 | Debtor 2 | | | |
| Gross receipts (before all deductions) | \$180.00 | | | | |
| Ordinary and necessary operating expenses | -\$0.00 | | | | |
| Net monthly income from a business, profession, or farm | \$180.00 | | Copy | \$180.00 | |

here

Official Form 106l Schedule I: Your Income page 3

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| | | Docu | iment Page 42 of 82 | 2 | | |
|----------------------------------|---|--|---|----------------------------------|----------------|--------------------|
| Fill in this infor | mation to identify your | case: | | | | |
| Debtor 1 | Jasmine | S | Utley | | | |
| Debtor 2 | First Name | Middle Name | Last Name | Check if this is: | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filir | ıg | |
| United States E | Bankruptcy Court for the | Northern | District of Illinois | A supplement st expenses as of t | | etition chapter 13 |
| Case number | | | (State) | <i>5</i> , poi/1000 do 01 (| no ronowing da | |
| (If known) | | | _ | MM / DD / YYYY | , | |
| Official | Form 106J | | | | | |
| Schedul | e J: Your Exp | enses | | | | 12/15 |
| information. If | = | | re filing together, both are equall form. On the top of any addition | | | number |
| Part 1: Des | cribe Your Househo | old | | | | |
| 1. Is this a joi | int case? | | | | | |
| ✓ No. Go | o to line 2 | | | | | |
| Yes. D | oes Debtor 2 live in a s | separate household? | | | | |
| | No | | | | | |
| [| Yes. Debtor 2 must f | ile Official Forms 106J-2, <i>Exper</i> | nses for Separate Household of Debi | for 2. | | |
| 2. Do you hav | re dependents? | lo . | | | | |
| Do not list [Debtor 2. | 1 7 1 | es. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's | Does depen | dent live |
| Dobtoi 2. | | adii deportuent | Child | age 6 years | with you? No. | |
| | | | | | ✓ Yes. | |
| expenses of | penses include of people other | lo | | | | |
| than yourself an dependent | u youi | 'es | | | | |
| Part 2: Esti | mate Your Ongoing | Monthly Expenses | | | | |
| | of a date after the banl | | ou are using this form as a suppl plemental Schedule J, check the | | - | |
| | • | cash government assistance it on Schedule I: Your Income | - | | Y | our expenses |
| | I or home ownership early the ground or lot. 4. | xpenses for your residence. In | nclude first mortgage payments and | | 4. | \$787.00 |
| If not inc | luded in line 4: | | | | | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 Jasmine
 S
 Utley
 Case number (if known)

 First Name
 Middle Name
 Last Name

| First Name | Middle Name Last Name | | |
|--|--|-----|---------------|
| | | | Your expenses |
| 5. Additional mortgage payments | for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural gas | | 6a. | \$175.00 |
| 6b. Water, sewer, garbage collection | ion | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Interne | et, satellite, and cable services | 6c. | \$150.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping supplie | | 7. | \$646.00 |
| 8. Childcare and children's educat | tion costs | 8. | \$22.00 |
| 9. Clothing, laundry, and dry clean | ning | 9. | \$75.00 |
| 10. Personal care products and se | ervices | 10. | \$30.00 |
| 11. Medical and dental expenses | | 11. | \$0.00 |
| 12. Transportation. Include gas, ma | aintenance, bus or train fare. | 12. | \$90.00 |
| 13. Entertainment, clubs, recreation | ion, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and re | religious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance deducte | ed from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$0.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$0.00 |
| 15d. Other insurance. Specify: | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes dedu | ucted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease payments: | | 10 | |
| 17a. Car payments for Vehicle 1 | | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | | 17b | \$0.00 |
| 17c. Other. Specify: | | 17c | \$0.00 |
| 17d. Other. Specify: | | 17d | \$0.00 |
| 18. Your payments of alimony, mai | intenance, and support that you did not report as deducted from | 174 | \$0.00 |
| your pay on line 5, Schedule I, | , Your Income (Official Form 106I). | 18. | |
| | upport others who do not live with you. | | |
| Specify: | | 19. | \$0.00 |
| | not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | |
| 20a. Mortgages on other property | У | 20a | \$0.00 |
| 20b. Real estate taxes. | | 20b | \$0.00 |
| 20c. Property, homeowner's, or re | | 20c | \$0.00 |
| 20d. Maintenance, repair, and upl | | 20d | \$0.00 |
| 20e. Homeowner's association or | r condominium dues | 20e | \$0.00 |

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| Debtor 1 | | S | Utley | Case number (if known) | | |
|-------------------|--|---------------------------|------------------------------|------------------------|-----|------------|
| | First Name | Middle Name | Last Name | | | |
| 21. Othe i | Specify: | | | | 21 | \$0.00 |
| | | | | | | |
| 22. Calc | ulate your monthly expense | es. | | | | \$1,975.00 |
| 22a. A | Add lines 4 through 21. | | | | | \$0.00 |
| 22b. (| Copy line 22 (monthly expens | ses for Debtor 2), if any | , from Official Form 106J-2 | | | \$1,975.00 |
| 22c. A | add line 22a and 22b. The res | sult is your monthly exp | enses. | | 22. | |
| 23.Calcu | late your monthly net inco | me. | | | · | |
| 23a. (| Copy line 12 (your combined | monthly income) from | Schedule I. | | 23a | \$2,400.34 |
| 23b. (| Copy your monthly expenses | from line 22 above. | | | 23b | \$1,975.00 |
| | Subtract your monthly expens | | ncome. | | | \$425.34 |
| • | The result is your monthly ne | t income. | | | 23c | |
| mort | example, do you expect to fin gage payment to increase or do 'es Explain here: Debtor has insurance | | modification to the terms of | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|------------------------------|-------------|--|
| Debtor 1 | Jasmine | S | Utley | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | |
| Case number | | | (, | | |

Official Form 106Dec

| П | Check | if | this | is | an |
|---|-------|----|---------|----|----|
| | amano | ما | d filir | 2 | |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Pai | t 1: Sign Below | | | | | |
|-----|---|---|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | |
| | ✓ No | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | |
| | | | | | | |
| | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and | | | | |
| × | /s/ Jasmine Utley | × | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | |
| | Date 4/5/2018 | Date | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | |

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| Fill in t | this infor | mation to identify your c | ase: | | | | | |
|-----------------|------------------------|---|-------------------------|--|--------------------|----------|----------|-------------------------------|
| Debto | r 1 | Jasmine | S | Utley | | | | |
| Debto | r 2 | First Name | Middle I | Name Last Na | me | | | |
| | e, if filing) | First Name | Middle I | Name Last Na | me | | | |
| United | l States E | Sankruptcy Court for the: | Northern | District of Illin | | | | |
| | number | | | (St | ate) | | | |
| (If know | n) | | | | | | | Check if this is a |
| Offi | cial | Form 107 | | | | | | amended filing |
| Stat | eme | nt of Financia | l Affairs f | or Individuals | Filing for | Bankrı | uptcv | 04/16 |
| inform numbe | nation. I er (if kn | f more space is neede own). Answer every q | d, attach a sepuestion. | arried people are filing arate sheet to this for | n. On the top o | | | |
| Part 1 | Give | Details About Your | Marital Status | and Where You Live | d Before | | | |
| 1. | What is | your current marital sta | itus? | | | | | |
| | ш | ried married | | | | | | |
| 2. | During t | he last 3 years, have yo | u lived anywher | e other than where you | live now? | | | |
| | | . List all of the places yo | u lived in the las | t 3 years. Do not include Dates Debtor 1 lived there | where you live n | OW. | | Dates Debtor 2 lived there |
| | | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| | | 7 S. Yale nber Street | | From 01/2013 To 04/2016 | Number Stre | et | | From To |
| | Chi | cago Illinois | 60628 | | | | | |
| | City | State | Zip Code | | City | State | Zip Code | |
| | | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| | Nur | nber Street | | From | Number Stre | et | | From |
| | City | State | Zip Code | | City | State | Zip Code | |
| | nd territo | <i>ries</i> include Arizona, Califo | mia, Idaho, Louis | oouse or legal equivalen siana, Nevada, New Mexic Codebtors (Official Forn | o, Puerto Rico, Te | | | ommunity property states) |

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Utley Debtor 1 Jasmine Case number (if known) First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages, $\overline{\mathbf{A}}$ Wages, \$2526.42 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$9100.00 For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) \$650.00 Est. YTD LINK From January 1 of current year until the date you filed for bankruptcy: Est. LINK \$3,800.00 For last calendar year: (January 1 to December 31, 2017 Est. LINK \$3,800.00 For the calendar year before that: (January 1 to December 31, 2016

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Utley Debtor 1 Jasmine Case number (if known) First Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code

vendors
Other

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| 1 | Jasmine | | S | Utle | | Case number | (if known) |
|------------------|--------------------------------------|--|---|---|--|---|--|
| | First Name | | Middle Name | Las | t Name | | |
| nsi orp ge | ders include your porations of which | relatives; a you are a for a busin | ny general partners n officer, director, ess you operate as | s; relatives of any operson in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing c domestic support obligations, |
| ✓ | No | | | | | | |
| Ī | Yes. List all pay | ments to a | an insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| - | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | No | _ | ranteed or cosigne | - | Total amount paid | Amount you still owe | Reason for this payment |
| | | | | раушеш | paid | Still OWE | Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | | | · · | | | | |
| | Insider's Name | | | | | | |
| | Insider's Name Number Street | | | | | | |
| | | State | Zip Code | | | | |

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Utley Debtor 1 Jasmine Case number (if known) First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished.

City

State

Zip Code

Property was attached, seized, or levied.

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| Debt | tor 1 | Jasmine | S | Utley | Case number (if known) | ı | |
|------|----------|---|-------------------------|------------------------------|------------------------------|--------------------------|--------------------|
| | | First Name | Middle Name | Last Name | | | |
| 11. | | thin 90 days before you filed counts or refuse to make a p | | | nk or financial institution, | set off any amou | nts from your |
| | ✓ | No Yes. Fill in the details. | | | | | |
| | ш | res. I iii ii i tile details. | | | | | |
| | | | | Describe the action the | creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | Number Street | | | | | |
| | | | _ | Last 4 digits of account nu | ımber: XXXX- | | |
| | | City State | Zip Code | | | | |
| 12. | | hin 1 year before you filed foointed receiver, a custodia | | y of your property in the po | ossession of an assignee fo | or the benefit of c | reditors, a court- |
| | V | No | | | | | |
| | | Yes | | | | | |
| Part | 5: | List Certain Gifts and Co | ontributions | | | | |
| 13. | Wi | ithin 2 years before you filed | d for bankruptcy, did y | ou give any gifts with a tot | al value of more than \$600 | per person? | |
| | ✓ | No Yes. Fill in the details for e | each gift. | | | | |
| | | Gifts with a total value of per person | _ | Describe the gifts | | Dates you gave the gifts | Value |
| | | | | | | | |
| | | Person to Whom You Gave | the Gift | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Person's relationship to you | · | | | | |
| | | | | | | | |
| | | Person to Whom You Gave | the Gift | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Person's relationship to you | | | | | |

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| Debtor ¹ | 1 Jasmine | S | Utley | Case number (if know) | 7) | |
|----------------------|---------------------------|----------------------------|-----------------------------------|---------------------------|----------------------|--------------------|
| | First Name | Middle Name | Last Name | | | |
| | | | | | | |
| 14. W | ithin 2 years before you | filed for bankruptcy, die | d you give any gifts or contribut | ions with a total value o | f more than \$600 | to any charity? |
| V | No | | | | | |
| | _ | | | | | |
| L | Yes. Fill in the details | for each gift or contribut | tion. | | | |
| | Gifts or contributions | s to charities | Describe what you contrib | outed | Date you | Value |
| | that total more than | | | | contributed | |
| | | | | | | |
| | | | _ | | | |
| | Charity's Name | | | | | |
| | | | _ | | | |
| | | | | | | |
| | Number Street | | _ | | | |
| | | | | | | |
| | City Sta | ite Zip Code | _ | | | |
| | City Sta | ite Zip Code | | | | |
| C - | List Certain Losses | | | | | |
| art 6: | List Certain Losses | • | | | | |
| | | | | | | |
| Wi | thin 1 year before you f | iled for bankruptcy or si | ince you filed for bankruptcy, di | d you lose anything beca | ause of theft, fire, | other disaster, or |
| | mbling? | | | | , , | , |
| _ | | | | | | |
| | No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | 4 | | | | | |
| | Describe the propert | | Describe any insurance co | | Date of your | Value of property |
| | how the loss occurre | d | Include the amount that insu | | loss | lost |
| | | | pending insurance claims or | n line 33 of Schedule | | |
| | | | A/B: Property. | | | |
| | | | | | | |
| | _ | | | | | |
| art 7: | List Certain Payme | nts or Transfers | | | | |
| |] No | | | | | |
| V | Yes. Fill in the details. | | | | | |
| | • | | Description and value of a | ny property | Date payment | Amount of |
| | | | transferred | ily property | or transfer | payment |
| | | | transierrea | | was made | payment |
| | 0 | | | | | # 400 00 |
| | Semrad Law Firm | | _ Attorney's Fee - 400.00 | | 3/6/2018 | \$400.00 |
| | Person Who Was Paid | | | | | |
| | 11101 S. Western Ave | nue | _ | | | |
| | Number Street | | | | | |
| | | | | | | |
| | | | - | | | |
| | | nois 60643 | _ | | | |
| | City Sta | te Zip Code | | | | |
| | <u> </u> | | _ | | | |
| | Email or website addre | ss | | | | |
| | <u> </u> | | _ | | | |
| | Person Who Made the | Payment, if Not You | | | | |
| | | | | | | |
| | Person Who Was Paid | | - | | | |
| | reison who was raid | | | | | |
| | | | | | | |
| | Number Ohres | | _ | | | |
| | Number Street | | - | | | |
| | Number Street | | _ | | | |
| | Number Street | | - - | | | |
| | | ite Zin Code | - - - | | | |
| | Number Street City Sta | ate Zip Code | - - - | | | |
| | City Sta | · | - - - | | | |
| | | · | - - - | | | |
| | City Sta | ss | - - - | | | |

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| | Jasmine | S | | se number <i>(if known)</i> | |
|----------|--|-----------------------------|---|---|------------------------|
| | First Name | Middle Name | Last Name | | |
| hel | thin 1 year before you file p you deal with your cre not include any payment o | ditors or to make paym | | If pay or transfer any property to | anyone who promised |
| ✓ | No Yes. Fill in the details. | | | | |
| | | | Description and value of any proper transferred | = | Amount of payment |
| | | | ti aliseri eu | payment or transfer was made | |
| | Person Who Was Paid | | - | | |
| | Number Street | | - | | |
| | | 7: 0 1 | - - | | |
| | City State | Zip Code | | | |
| and | d transfers that you have all No Yes. Fill in the details. | ready listed on this stater | | | |
| | | | Description and value of property transferred | Describe any property or payments received or debts in exchange | paid transfer was made |
| | Person Who Received Tr | ransfer | - | | |
| | Number Street | | - | | |
| | City State Person's relationship to y | ' | - | | |
| | Person Who Received Tr | ransfer | - | | |
| | Number Street | | - | | |
| | City State Person's relationship to y | ' | - | | |
| bei | thin 10 years before you neficiary? ese are often called asset-p | | d you transfer any property to a self-se | ttled trust or similar device of wh | ich you are a |
| ✓ | No Yes. Fill in the details. | | | | |
| ш | 1 00.1 | | Description and value of the prop | erty transferred | Date transfer was |
| | | | | | made |

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Debtor 1 Jasmine Case number (if known) First Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Debtor 1 Jasmine Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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| Deb | | Jasmine | | S | Utley | Case number | er (if known) | |
|------|----------|----------------------------|----------------|-------------------|------------------------------|------------------------------|--|----------------------|
| | | First Name | | Middle Name | Last Name | | | |
| 26. | Hav | e you been a part | y in any judic | ial or administ | rative proceeding under | any environmental law? | ? Include settlements and orde | ers. |
| | | No Yes. Fill in the det | rails | | | | | |
| | Ч | 100.1 | ano. | | Court or agency | Natu | re of the case | Status of the |
| | | Case title | | | | | | Case |
| | | | | | Court Name | | | Pending |
| | | Case number | | | NumberStreet | | | On appeal Concluded |
| | | | | | City State | Zip Code | | Concluded |
| Part | 11: | Give Details Ab | oout Your B | susiness or C | onnections to Any Bu | siness | | |
| 27. | Witl | nin 4 years before | you filed for | bankruptcy, di | d you own a business or | have any of the followin | g connections to any business | s? |
| | | A sole propri | etor or self-e | mployed in a tr | ade, profession, or other | r activity, either full-time | or part-time | |
| | | | | | LLC) or limited liability pa | artnership (LLP) | | |
| | | A partner in a | - | | ve of a corporation | | | |
| | | An owner of | at least 5% o | f the voting or e | equity securities of a corp | poration | | |
| | ✓ | No. None of the a | | | | | | |
| | | Yes. Check all that | at apply abov | e and fill in the | details below for each b | | Faralous Identification | |
| | | | | | Describe the nati | are of the business | Employer Identification n include Social Security n | |
| | | Business Name | | | | | EIN: | |
| | | Number Street | | | _ | | Dates business existed | |
| | | City | State | Zip Code | Name of accounts | ant or bookkeeper | From To | |
| | | | | | | | | |
| | | | | | Describe the natu | ure of the business | Employer Identification n | |
| | | Business Name | | | _ | | include Social Security n | umber of trin. |
| | | | | | | | Dates business existed | |
| | | Number Street | | | Name of account | ant or bookkeeper | Dates busiliess existed | |
| | | City | State | Zip Code | | | From To | <u></u> |
| | | | | | | | | |
| | | | | | Describe the natu | ure of the business | Employer Identification n include Social Security n | |
| | | Business Name | | | _ | | EIN: | |
| | | Number Street | | | _ | | Dates business existed | |
| | | City | State | Zip Code | Name of account | ant or bookkeeper | From To | |
| | | - | | • | | | | |
| | | | | | | | | |

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| Debtor | 1 Jasmine | S | Utley | Case number (if known) |
|--------|--|--|---------------------------------|---|
| | First Name | Middle Name | Last Name | |
| | reditors, or other parti | es. | ou give a financial statemer | nt to anyone about your business? Include all financial institutions, |
| L | Yes. Fill in the detai | IS Delow. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | ramo | | | |
| | Number Street | | _ | |
| | | | <u>_</u> | |
| | City | State Zip Code | | |
| Part 1 | 2: Sign Below | | | |
| tru | e and correct. I unders ankruptcy case can re | stand that making a false sta esult in fines up to \$250,000, | atement, concealing proper | nts, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | /S/ Ja | smine Utley e of Debtor 1 | | Signature of Debtor 2 |
| | Olgitature | e of Debtor 1 | | Date |
| | Date 4/ | 5/2018 | | Date |
| Dic | l you attach additional | pages to Your Statement of | f Financial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? |
| | l No | . • | | , |
| | Yes | | | |
| ш | 163 | | | |
| Dic | l you pay or agree to p | ay someone who is not an a | ttorney to help you fill out b | ankruptcy forms? |
| | No | | | |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Dis | trict of Illinois | | | | | |
|-----|--|------------------------------|---|----------------------------------|--|--|--|--|
| re_ | Jasmine S Utley | | Case No. | | | | | |
| | Debtor | | 01 1 | (If known) | | | | |
| | | | Chapter | Chapter 13 | | | | |
| | DISCLOSURE OF | COMPENSATI | ON OF ATTORNEY | FOR DEBTOR | | | | |
| 1 | . Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing of th | ne petition in bankruptcy, or agreed | d to be paid to me, for services | | | | |
| | For legal services, I have agreed to ac | cept | | \$4,000.00 | | | | |
| | Prior to the filing of this statement I h | ave received | | \$400.00 | | | | |
| | Balance Due | | | \$3,600.00 | | | | |
| 2 | . The source of the compensation paid | to me was: | | | | | | |
| | ✓ Debtor | Other (speci | fy) | | | | | |
| 3 | . The source of the compensation paid | to me is: | | | | | | |
| | Debtor | Other (speci | fy) | | | | | |
| 4 | I have not agreed to share the abomembers and associates of my la | | tion with any other person unless t | they are | | | | |
| | | firm. A copy of the agree | with a other person or persons whement, together with a list of the na | | | | | |
| 5 | In return for the above-disclosed fee, a. Analysis of the debtor's finance bankruptcy; | • | egal service for all aspects of the bang advice to the debtor in determin | | | | | |
| | b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; | | | | | | | |
| | c. Representation of the debtor | at the meeting of creditor | s and confirmation hearing, and an | ny adjourned hearings thereof; | | | | |
| | d. Representation of the debtor | n adversary proceedings | and other contested bankruptcy m | natters; | | | | |
| 6 | . By agreement with the debtor(s), the a | above-disclosed fee does | not include the following services | : | | | | |
| | | | | | | | | |
| | | CERTIF | CICATION | | | | | |
| | certify that the foregoing is a completotor(s) in this bankruptcy proceedings. | e statement of any agreer | ment or arrangement for payment to | o me for representation of the | | | | |
| | 4/5/2018 | | /s/ Hilary L Jabs | | | | | |
| | Date | | Signature of Attorney | | | | | |
| | | | Semrad Law Firm | | | | | |
| | - | | Name of law firm | _ | | | | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

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- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
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F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$400.00 toward the flat fee, leaving a balance due of \$3,600.00; and \$61.76 for expenses, leaving a balance due of \$3,971.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 4/5/2018 | |
|----------|------------|------------------------|
| Signed: | : | |
| /s/ Jasn | nine Utley | |
| | | /s/ Hilary L Jabs |
| Debtor(| s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1.717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Utley, Jasmine S | Case No | |
|-----------------|------------------|---|--------------------------------------|
| | Debtor(s) | Oase No. | |
| | | Chapter. | Chapter13 |
| | VERIFIC | CATION OF CREDITOR MAT | TRIX |
| TI knowledge | | y that the attached list of creditors is tr | rue and correct to the best of their |
| Date: | 4/5/2018 | /s/ Utley, Jasmin | ne S |
| | | Utley, Jasmine S Signature of Deb | |

KIA MOTORS FINANCE PO BOX 20815 FOUNTAIN VALLEY, CA, 92728

NATIONAL REGISTERED AGENTS INC 208 SO LASALLE ST, SUITE 814 Chicago, IL, 60604

ROSS C WILLIAMS 3161 MICHELSON DR #190 Irvine, CA, 92612

DEPT OF ED/NAVIENT PO BOX 9635 WILKES BARRE, PA, 18773

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

SOURCE RECEIVABLES MNG 4615 DUNDAS DR STE 102 GREENSBORO, NC, 27407

CREDIT MANAGEMENT LP PO Box 118288 Carrollton, TX, 75011

CREDITORS DISCOUNT & A 415 E MAIN ST STREATOR, IL, 61364

COMENITYBANK/VICTORIA 220 W SCHROCK RD WESTERVILLE, OH, 43081

ATT SERVICES PO Box 8212 Aurora, IL, 60572

Bank of America 1701 River Oaks Dr # D Calumet City, IL, 60409

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Illinois Department of Employment Security PO Box 19509 Springfield, IL, 62794

Illinois Tollway PO Box 5544 Chicago, IL, 60680

City of Chicago - Dep't of Revenue PO Box 88292 Chicago, IL, 60608

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

Illinois Department of Revenue PO Box 64338 Chicago, IL, 60664

ComEd 1919 Swift Drive Oak Brook, IL, 60523 Case 18-10011 Doc 1 Filed 04/05/18 Entered 04/05/18 15:25:18 Desc Main Document Page 71 of 82

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
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THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
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- 9. Be available to respond to the debtor's questions throughout the term of the plan.
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- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
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- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

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F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

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- 3. Before signing this agreement, the attorney has received, \$400.00 toward the flat fee, leaving a balance due of \$3,600.00; and \$61.76 for expenses, leaving a balance due of \$3,971.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 4/5/2018 | | |
|----------|--------------------------|------------------------|--|
| Signed: | 0 | | |
| /s/ Jasm | ine Utley WINNING (IIII) | | |
| | | /s/ Hilary L Jabs | |
| Debtor(s | | Attorney for Debtor(s) | |

Do not sign if the fee amounts at top of this page are blank.

THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Re Retention of The Semrad Law Firm LLC

Dear Client,

Thank you for choosing The Semrad Law Firm LLC (the Firm) to represent you in connection with your Chapter 13 Bankruptcy. In addition to the terms contained in the "Court Approved Retention Agreement (CARA) it is our policy to confirm in writing how and when our fees will be paid. If there are any terms contained in this document that are in conflict with CARA, those terms are void.

The fee charged by the Firm will be paid through the Chapter 13 plan. Each month, you will pay the Trustee the amount stated in your Chapter 13 plan. The Trustee will then disburse that money out according to the provisions of your plan.

The Firm is going to seek to have the attorney's fees and costs paid before your creditors. That means that the money you send to the Trustee each month will first be paid to the Firm and not to your creditors. This includes creditors such as your mortgage company, your car note, parking tickets, taxes, and any other creditors that may be included in your plan.

In the event that your case is dismissed before completion of the plan, it is likely that the attorney fees will have been paid while little of your other debts, including the mortgage or car note, were paid.

The benefit that you will receive from the Firm is our commitment to perform any and all work reasonably necessary to represent you in this bankruptcy without requiring you to pay a substantial amount of the fee up front. Ordinarily, the majority of the work required in a Chapter 13 case is performed during the initial months of the representation prior to confirmation of the case.

There is the possibility that your creditors or the Trustee may object to the Firm being paid under this arrangement. In the event of such an objection, we may lower that amount that we will receive each month in order to resolve the objection. However, the creditor may seek additional attorneys fees as a result of this objection.

Despite the value that we see in this arrangement, the Bankruptcy Court has previously ruled that this fee arrangement offers no value to you because the action of paying your attorney before paying your creditors is a deviation from the Model Chapter 13 Plan that had been adopted by the Court. The language that we propose to enter into your plan will have the sole purpose of paying the Firm before your creditors. This language by itself serves only to benefit the Firm by paying its fees.

THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

If you do not wish to pay your attorney's fees ahead of your creditors, you have the following options:

- a. You can to pay an upfront retainer of \$1,500 prior to filing your case and elect for the plan to pay your car note and mortgage arrears in equal set monthly payments along with your attorney's fees; or
- b. If your budget allows, you can elect to pay a higher monthly Chapter 13 payment that would provide for equal set monthly payments to your car note and mortgage arrears while paying the attorney's fee within 12 months; or
- c. You can seek representation by another firm under a different payment arrangement.

Please carefully review this letter. If the terms are not consistent with your understanding of our engagement in any respect or if you have any questions concerning the same, please notify us promptly. You can also seek advice from other counsel regarding your rights under this arrangement. Firm policy and a prior court order require that we receive confirmation of your accepteance of these terms in the form of your signature at the bottom of this letter. Please return the signed copy to the Firm as soon as possible.

Very Truly Yours,

THE SEMRAD LAW FIRM LLC

One of its Attorney

Accepted:

Jasmue Utleze

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| Debtor 1 Jasmine First Name | S Utl | ey Case numb | er (if known) |
|---|---|---|---|
| Part 6: Answer These Que | estions for Reporting Purposes | | |
| 16. What kind of debts do you have? | "incurred by an individual p No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily b | rimarily for a personal, family, or usiness debts? Business debts? Business debts? Business debts | are debts that you incurred to obtain on of the business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fur | | empt property is excluded and administrative unsecured creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 mil \$100,000,001-\$500 m | on \$1,000,000,001-\$10 billion lion \$10,000,000,001-\$50 billion |
| 20. How much do you estimate your liabilities to be? | □ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | on \$1,000,000,001-\$10 billion lion \$10,000,000,001-\$50 billion |
| Part 7: Sign Below | I have everyinged this petition, one | d I doologo ugaden was eliku ef werde | |
| For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | |
| | /s/ Jasmine Utley Signature of Debtor 1 Executed on 4/5/2018 MM / DD / | Ex | nature of Debtor 2 ecuted on |

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| | × | | | | |
|------------------------------------|---------------------------|--------------------------------|------------------------------------|--|--------------------------------------|
| Fill in this inform | nation to identify your c | ase: | | | |
| Debtor 1 | Jasmine | S | Utley | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | | | | | |
| (Spouse, It lilling) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | Northern D | istrict of Illinois | | |
| Case number | | | (State) | | |
| (If known) | | | | | |
| Official F | orm 106De | eC | | | Check if this is a amended filing |
| Declarati | on About an | Individual Debto | r's Schedul | les | 12/1 |
| If two married p | eople are filing togeth | er, both are equally responsit | ble for supplying co | prrect information. | |
| money or prope U.S.C. §§ 152, 1 | | | | s. Making a false statement, concealing p p to \$250,000, or imprisonment for up to 2 | |
| Did you pa | y or agree to pay some | eone who is NOT an attorney | to help you fill out I | bankruptcy forms? | |
| ✓ No | | | | | |
| Yes. N | lame of person | | Attach Bankrup Signature (Offic | otcy Petition Preparer's Notice, Declaration, and cial Form 119). | d |
| | | | * | | |
| | | | , | | |
| | are true and correct. | Attle. | ary and schedules f | filed with this declaration and | |

Signature of Debtor 2

MM/DD/YYYY

Signature of Debtor 1

Date 4/5/2018

MM/DD/YYYY

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| Debtor 1 | Jasmine | S | Utley | Case number (if known) | |
|-------------------|---|-----------------------------|--------------------------|--|--|
| CAUD-MAILE MARKET | First Name | Middle Name | Last Name | | |
| | thin 2 years before yo editors, or other parti | | ou give a financial stat | ement to anyone about your business? Include all financial institutions, | |
| V | No Yes. Fill in the detail | s below. | | | |
| - Contractor | , | | Date issued | | |
| | Name | | MM/DD/YYYY | | |
| | Number Street | | | | |
| | City | State Zip Code | _ | | |
| Part 12: | Sign Below | | | | |
| true | and correct. I unders | tand that making a false st | atement, concealing pr | chments, and I declare under penalty of perjury that the answers are roperty, or obtaining money or property by fraud in connection with p to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | |
| | | V | | Date | |
| | Date 4/s | 5/2018 | | Date | |
| Did | Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | | | | |
| V | No | | | | |
| | Yes | | | | |
| Did | you pay or agree to p | ay someone who is not an a | ttorney to help you fill | out bankruptcy forms? | |
| V | No | | | | |
| □ | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, | |

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| Debte | or 1 Jasmine First Name | S Middle Name | Utley Last Name | Case number (if known) | |
|-------|----------------------------|---|--|---|-------------|
| 16. | Calculate the | median family income that applies t | | | |
| | | state in which you live. | Illinois | * | |
| | 16b. Fill in the | number of people in your household. | 2 | | |
| | 16c. Fill in the | nedian family income for your state and | d size of | | \$68,687.00 |
| | household using the | | | list of applicable median income amounts, go online also be available at the bankruptcy clerk's office. | |
| 17. | How do the lin | | e for ano form. This list may | also be available at the barmaptoy close 5 cmoe. | |
| | 17a. Line unde | 5b is less than or equal to line 16c. Or 11 U.S.C. § 1325(b)(3). Go to Part 3 | n the top of page 1 of this fo Do NOT fill out <i>Calculation</i> | rm, check box 1, <i>Disposable income is not determined of Disposable Income</i> (Official Form 122C-2). | · |
| | U.S. C | 5b is more than line 16c. On the top of § 1325(b)(3). Go to Part 3 and fill o copy your current monthly income from | ut Calculation of Disposat | box 2, Disposable income is determined under 11 ble Income (Official Form 122C-2). On line 39 of that | |
| Part | 3: Calculate | Your Commitment Period Und | er 11 U.S.C. §1325(b)(4 | 1) | |
| 18. | Copy your tota | I average monthly income from line | 11. | | \$1,866.76 |
| 19. | | | | ot filing with you, and you contend that calculating the ir spouse's income, copy the amount from line 13. | 9 |
| | 19a. If the mari | tal adjustment does not apply, fill in 0 o | on line 19a. | | -\$0.00 |
| | 19b. Subtract | line 19a from line 18. | | | \$1,866.76 |
| 20. | Calculate you | current monthly income for the yea | ar. Follow these steps: | | |
| | 20a. Copy line | 19b. | | | \$1,866.76 |
| | Multiply b | y 12 (the number of months in a year). | | | x 12 |
| | 20b. The result | is your current monthly income for the | year for this part of the form | | \$22,401.12 |
| | 20c. Copy the | median family income for your state an | d size of household from line | ∍16c. | \$68,687.00 |
| 21. | How do the lin | es compare? | | | |
| | Line 20b is commitme | less than line 20c. Unless otherwise on t period is 3 years. Go to Part 4. | rdered by the court, on the t | op of page 1 of this form, check box 3, The | |
| | Line 20b is 4, The con | more than or equal to line 20c. Unless amitment period is 5 years. Go to Part | s otherwise ordered by the co | ourt, on the top of page 1 of this form, check box | |
| Part | 4: Sign Belo | W | | | |
| | By signing | here, I declare under penalty of perjury | that the information on this | statement and in any attachments is true and correct. | |
| | | 0 | 0.110 | | |
| | | asmine Utley Ire of Debtor 1 | ★ _{si} | gnature of Debtor 2 | |
| | | 1/5/2018 | Da | ate | |
| | | MM/DD/YYYY | | MM/DD/YYYY | |
| | | ked 17a, do NOT fill out or file Form 12 ked 17b, fill out Form 122C-2 and file | | of that form, copy your current monthly income from li | ne 14 |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Utley, Jasmine S Debtor(s) | Case No | Case No | | |
|-----------------|--|--|------------------------------------|--|--|
| | | Chapter | Chapter13 | | |
| | VERIFI | CATION OF CREDITOR MATE | RIX | | |
| Tr knowledge | ne above named Debtors hereby veri e. | fy that the attached list of creditors is true | e and correct to the best of their | | |
| Date: | 4/5/2018 | /s/ Utley, Jasmine Utley, Jasmine S Slanature of Debto | Thermal rocco | | |